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01/15/2013

Intake Health Screening & Transfers



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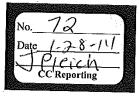
Objectives

- Identify forms to be completed at intake:
- Discuss the purpose of medical and mental health screening
- Summarize the details related to completing facility screening forms
- · Apply indications for immediate referral

Objectives

- Describe process for follow-up of identified medical and mental issues
- Classify the transfer processes for prisons, including transfers inside and outside of institution

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Definitions	7	-	·.
* 'Intake' screening refers to the medical	*		
evaluation upon an inmate's initial arrival		-	
into a correctional system; i.e. arrival into a fall or new entry into a prison system	į		· · · · · · · · · · · · · · · · · · ·
1 "	Ī.		
 Transfer screening refers to the evaluation or record review of an inmate transferred 		· · · · · · · · · · · · · · · · · · ·	
from one correctional facility to another - within the same system		1 1 1 1	<u> </u>
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Purpose of Screening Process			
 Early Identification of acute and chronic medical and mental health needs 	1		
- This is the critical time to identify needs and assure follow-up occurs	+		· · · · · · · · · · · · · · · · · · ·
- Detect any scheduled or needed appointments or	4		
referrals	1		<u> </u>
Determine disposition Placement and housing recommendations.			
- Immediate and routine healthcare referrals	-	4,	=
Provide information on access to bealthcare			
- Written and verbal::	<u>-</u> J		
•.			
Completing <u>Intake</u> Screening — When			
When:			
Immediately upon initial arrival to jail or		• • • • • • • • • • • • • • • • • • •	
prison intake facility			
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Completing Intake Screening -Who

- Who completes
 - Medical personnel
 - Health trained corrections staff (If no 24 hour nursing staff on-site, usually only occurs in jails)
 - If health trained corrections staff perform, appropriate medical follow-up must occur in compliance with facility policy

When Not to Accept Inmate

- Unconscious
- Semi-conscious
- Bleeding
- · Need of emergent medical attention

NOTE: This can be a challenge for prisons if you have parole violators who come directly into the facility from the street

Follow-Up Situations

- Medication Verification
 - Contact pharmacy, provider, etc. to verify
 - · Once verified, contact site physician for order
 - Unable to verify
 - Contact site physician for review of information and appropriate orders

 - DO not leave your shift without completion
 NEVER START MEDICATION WITHOUT AN ORDER
 FROM SITE PHYSICIAN

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3.

Intake Health Screening & Transfers: 01/15/2013 -Follow-Up Situations Make sure appointments are scheduled – Physicals - TST, immunizations - Chronic Care Clinics Make sure referrals are completed - Behavioral Health (If indicated) - Dental (screening within 7 days, exam within 30) Make stire security is informed about special housing or - Substance Abuse Witindrawal - Behavioral Health - Suicide Watch - Specials Needs Units What To Complete At Intake Intake Medical History and Screening Intake Mental Health Screening Provide verbal and written healthcare access Information to the patient Completing a Medical Intake Screening General Guidelines - Write legibly - Complete all blanks Explain yeş answers Take vital signs and include blood sugar if indicated and all other contract specific information. Determine current medical conditions Dates and hospital providers Names, phone numbers of general or specialty.

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physicians

Intake Health Screening & Transfers 01/15/2013 **General Guidelines** Obtain release of information Allows you to obtain additional records, healthcare data Determine medical history. - Dates and duration of care Allergies - Include symptoms (i.e. rash, nausea, hives). * Disposition - Notify security to insure proper placement in **General Guidelines** Obtain signatures - Screener and patient should sign - Additional review determined by site policy. Obtain TB history and symptom screening - Positive symptoms must be addressed Immediately - Positive history must do the following: Verify previous treatment; i.e. where, when and what received - Schedule with site physician for follow-up General Guidelines Medications - Include date and time of last dose: Obtain prescriber's name and phone number or name and address of current pharmacy

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01/15/2013 Intake Health Screening & Transfers **General Guidelines** Determine previous substance abuse history Previous history of alcohol use including how often, how much and last time used alcohol Previous problem with withdrawal such as blackouts or seizures Note: Review the Module in your manual titled "Substance Abuse Withdrawal" for more detailed information on screening for alcohol withdrawal and appropriate follow-up **General Guidelines** Determine previous substance abuse history - Previous history of drug use including type(s), how often and last time - Previous problems when stopped taking drugs - Are they currently detoxing? - If yes, from what substance? **General Guidelines** Psychlatric screening including the following: - Discussion about previous inpatient and outpatient psychlatric history, including illness, treatment dates and locations of treatment Obtain information regarding previous/current

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drug and/or alcohol abuse

- History of cerebral trauma or seizures

- History of sex offenses or yictimization

- Document all medication that the patient is receiving or has received in the past related to

Mental Health diagnosis

th Screening & Transfers	•
••	•
General Guidelines	
· Current psychotropic medications	:
 Include medication name(s), last dose, provider and pharmacy 	· · · · · · · · · · · · · · · · · · ·
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General Guidelines	
	
Document behavioral observations Include all abnormal observations in the following areas:	· <u></u>
following areas! The Eye contact	
Appearance	
Activity Mood, terdified, crying, concentration	<u> ئى </u>
Affect, delusional, hallucinations Memory, intellectual functioning	
• Speech	
Psychötic symptoms Orientation	
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General Guidelines	
Access Suicide Potential by Including review	
of the following	
Level of risk Arresting öfficer believes may be suiddel	P
Has slonificant psychlatric history or shows signs of	
depression such as crying, anxious, alraid or angry * Expresses thoughts about killing self	
Expresses the loss of the will to live	1 <u> </u>
*	

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th Screening & Transfers	7
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Level of Risk	
History of suicide, has suicide plan, or has family history	
* Holds position of respect in community or appears unusually embarrassed or ashamed	a indi k a disangan kangangan yang paga pagan ang kangan ba
Expresses feeling of hopelessness	
Lack dose family and friends	
 _	·
Level of Risk	₩
Experienced significant loss within last six	
(6) months including loss of job, family	
member, etc.	
Worried about problems other than legal problems, (i.e. terminal illness)	
•	
 Under the influence of drugs-or alcohol or showing-signs of withdrawal 	
Sidering signs of the length of	
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æ	
Purpose of Screening	
Identify referrals	and an enter we have the
Immediate and routine medical and mental health referrals	
- Suicide precautions	
	·
- Contact physician or Mental health provider for	
Contact physician or Mental health provider for medication/emergent needs	
- Contact physician or Mental health provider for	
Contact physician or Mental health provider for medication/emergent needs	
- Contact physician or Mental health provider for medication/emergent needs - Substance Abuse Withdrawal	

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Purpose of Screening	: . -
Determine Placement and Housing	**************************************
recommendations	
General population Special housing needs	<u> </u>
- Medical moriltoring for potential withdrawal	
~ Or suitide precautions	
Provide security information regarding placement	
- Know process for notifying security of special	144 77 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
housing needs	<u> </u>
	=
	
Purpose of Screening	
* Provide information on access to healthcare	
services - Verbal explanation	s
- Written information	
- Avallable in different languages	
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Pallana Thursania	
Follow Through	1 14
Shift change is a busy time for medical and security staff	-
You should not leave the shift without	
ensuring immediate needs are getting	
appropriate attention	- Andrew Control of the Control of
	; <u>-1487 - E. A. F 14 - 14 - 14 - 14 - 14 - 14 - 14 - 1</u>

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Transfers	
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The following slides pertain to inmates transferring from one facility to another	* **
within the same correctional system	* · · · · · · · · · · · · · · · · · · ·
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Inmates Transferring Out to	1
Other Facilities	· · · · · · · · · · · · · · · · · · ·
Completing Transfer Summary	
- What is it?	
 Review and document information regarding inmate's medical and mental health needs prior to 	, , , , , , , , , , , , , , , , , , ,
transfer to another facility	
 This may be a stendardized form or a therough hand-written note. 	
	
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Completing Transfer Summary	
Transfer summary should include:	
- Last TB and/or chest X-ray - Known allergies	<u> </u>
- Current medications	<u> </u>
 Any current medical, dental or mental health problems 	
Including current treatment plan for identified canditions or problems.	
-i Pending appointments, outstanding diagnostic	
- Pending appointments, outstanding diagnostic work or specialty care. - Instructions to transport personnel regarding.	
work or specialty care. Instructions to transport personnel regarding any special needs	

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Intake Transfer Screening

- . What is it?..
 - Intaké screening performed on an inmate who currently has established health record for current incarceration
- · When would you use?
 - Intrasystem transfer (within a prison system)
 - Individual returning from furlough
- · When should it be done?
 - Within 12 hours of arrival to facility

Transfers Within A Prison System

- What should the receiving process include:
 - = Review of Inmate health record or health summary
 - Follow-up on any outstanding medical needs, which can include
 - · Ordering medications
 - Placing on medical, dental, mental fiealth and sickcall
 - Scheduling for Chronic Care Clinic
- Information should be posted regarding access to health care services

The Bottom Line

- All levels of healthcare providers are responsible
- Failure to recognize issues on arrival and a lack of follow through may result in unnecessary life threatening and emergent needs later

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Jail Personnel Only

- In addition to completing this module, you must complete the "Jail Intake Forms" Staff Learning Modules
- Your mentor, DON or HSA will provide the modules that relate to the intake forms that are used at your site
- Return the required paperwork from the modules with the paperwork from this module

Conclusion

- Complete Intake Health Screenings & Transfers
- Review Answers with Supervisor/Fad/Itator
- Complete the two-part Intake Health Screenings & Transfers Checklist
 - Part I (upper section) Review of information covered in
 - this module

 Part II (lower section) Review of Information covered during site specific OTT
- Complete Jail Intake Forms Staff Learning Modules (Jail Personnel Only)

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INTAKE HEALTH SCREENING & TRANSFERS

✓Orientation Checklist

Complete	& Initial the following:
In	ntake Health Screening & Transfers Test and review the answer key
opportun	viewed the module on <u>Intake Health Screening & Transfers</u> . I have had the ity to ask questions, and I have a basic understanding of the following f intake health screening and transfers:
	When and by whom the screening process should be completed When not to accept an inmate into the facility What should be completed at intake screening General guidelines for completing a medical intake screening General guidelines for completing a mental health intake screening Components of a transfer summary for inmates transferring out of one facility to another facility Components of a receiving screening process for inmates transferred into a facility Follow-up issues Failure to recognize and follow-up can lead to unnecessary life threatening and emergent needs later
Employee's Sig	mature Date
Frint Name In addition to me!	n to the module review the following has been demonstrated or explained
Intake Sc	reening (Jails & Prisons with Reception Units)
	Review of paperwork needing completion at Initial Intake and timeframes for completion (Jail-Personnel complete Jail Intake Forms Staff Learning Modules) Medical Screening: how, when and who completes (If completed by health-trained corrections officer, discuss process for referral of immediate needs to medical and follow-up required by medical.) Mental Health Screening: how, when and who completes Dental Screening: how, when and who completes Procedure and indications for immediate referral include items such as placing on stilicide precautions, detox, etc. Verbal and written orientation of inmate on access to healthcare services Procedure to verify and order current medication Determining disposition: how to notify security of placement/housing recommendations Documentation: what and where, include reminder on importance of completing
NA9052	all blanks on screening tools including vitals, etc. Contain New Employee Orientation Part Il Clinical © 2013 Contain Realth; Inc.

Inmate Transfers (Prisons)	Intake Health Screening & Transfers Checklist
Completion of chart review and transfer info of facility Procedure to complete and document receive transfers coming into this facility. Indications for referral to physician and how indications for referral to mental health and indications for referral to dental and how the Procedure to arrange for follow-up of pendil Procedure for physician review of intake chartering current medications. Referral to chronic clinic and how this is do Orientation of inmate on access to healthca Proper follow-up on documented health new Determining disposition and notifying secur. I have received an introductory explanation of the	ving screening on intrasystem withis is done thou this is done his is done ling specialty appointments arts he eds lity of placement and housing needs
opportunity to ask questions. Employee's Signature	Datie
Facilitator or Supervisor's Signature	
✓ File Original I	n Employee's Training File
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INTAKE HEALTH SCREENING & TRANSFERS

		⊠ Test
Na	met	
Fa	cility:Job Title:	· · · · · · · · · · · · · · · · · · ·
Ën	pployee ID#:	·
Ch	roose the best answer. Each question has only one answer.	
M	ultiple Choice / True or False	
1.	The purpose of the intake screening is:	
	 a. Early identification of acute and chronic medical and mental healt b. Provide recommendations to security regarding housing and/or pl c. Provide the patient with information regarding access to healthca d. All of the above e. None of the above 	acement needs
2.	You should not accept a patient if:	
	a. They state they are innocent and should not be there b. They are conscious and oriented to place and time. They are bleeding or in need of immediate medical attention d. They are unconscious e. A and B only f. C and D only	- 'E
3.	When completing a medical intake screening, generally you should do information:	ocument the following
	a. Vital signs b. Current medical conditions and previous medical history c. Current medications and allergies d. All of the above e: None of the above	
4.	When completing a mental health screening, generally you should do	cument the following:
	 a. Behavloral observations made regarding the inmate's actions b. Previous inpatient and outpatient psychiatric history c. Suicide potential d. Mother's maiden name e. A. B and D only fA, B and C only 	
		ā.
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	सिव्ययं संदेशीय अंदरदेशीय वे राजालाव र उत्तर
·5, -	The purpose of completing a transfer screening is:
	To inform security at the receiving facility of any security needs To provide review of medical and mental health needs prior to transport to another facility
	c. To ensure that security documents that the patient left the facility d. None of the above e. All of the above
6.	A transfer intake screening should be done by the receiving facility:
	a. Within 7 days of arrival to facility b. Within 12 hours of arrival to facility c. Within 14 days of arrival to facility d. None of the above
7.	The receiving 'transfer' screening process should include the following:
	a. Review of health record of a transfer health summary b. Review of inmate's incarceration record c. Determination of follow-up or outstanding medical needs d. Information regarding access to healthcare services at that facility e. A, B and C only f. A _i -C and D only
8,	A qualified medical staff person or a health-trained corrections officer should complete intake screening;
	True False
9.	Information regarding access to healthcare does not need to be provided in writing at the time of Intake.
	True False
10.	If a patient states a history of diabetes at the time of intake, it is not necessary to take a blood sugar.
	True ⊹False
	When completing the medical or mental health intake screening, you should notify security of placement or housing recommendations.
	True False
12.	If a patient states previous problems with withdrawal from alcohol or drugs, you should sign them up on the next physician's sick-call list with no other follow-up until then.
	True False
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13. A patient may have increased risk for suicide if they are under the influence of drugs and/or alcohol at the time of intake, showing signs of depression such as crying, anxiety, affald or if they hold a position of respect in the community and appear embarrassed or ashamed.

True False

14. When performing intake screenings, you should not leave the shift without ensuring immediate needs are getting proper medical attention.

True False

15. When completing a transfer summary, it is not important to document current medical history or outstanding specialty-care appointments:

Frue Fals

16. When receiving a patient from another correctional facility, it is not important to order their medications if the transferring facility did not send them with the patient.

True False

☑ Review Answers With Your Supervisor
✓ File Original In Employee's Training File

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